

| POSITION                  | INITIALS   | ID NO.       | DATE           |
|---------------------------|------------|--------------|----------------|
| FEE DETERMINATION         |            |              |                |
| O.I.P.E. CLASSIFIER       | <i>HW</i>  | <i>32</i>    | <i>2/1</i>     |
| FORMALITY REVIEW          | <i>etg</i> | <i>52861</i> | <i>2/22/01</i> |
| RESPONSE FORMALITY REVIEW | <i>gmm</i> | <i>657</i>   | <i>5/16/01</i> |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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